

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 09 / 508496 RECEIPT DATE: 03 / 08 / 00  
IA NUMBER: PCT/ JP99 / 04636 IA FILING DATE: 08 / 27 / 99  
FAMILY NAME: YAMAMOTO DELAY WAIVED (Y/N): N  
GIVEN NAME: MASAAKI DEMAND RECEIVED (Y/N): N  
PRIORITY CLAIMED (Y/N): Y PRIORITY DATE: 08 / 27 / 98  
NO BASIC FEE (Y/N): N US DESIGNATED ONLY (Y/N): N  
ATTORNEY DOCKET NUMBER: 9683/65 COUNTRY:  
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000  
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STATE/COUNTRY: IL ZIP: 60610

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APPLICATION TITLES:

PUSH-TYPE INFORMATION TRANSMISSION METHOD AND TRANSFER DEVICE THEREOF

TAB TO LAST POSITION, PUSH SEND



**UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark Office**

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Washington, D.C. 20231

## Bib Data Sheet

SERIAL NUMBER 09/508,496	FILING DATE 03/08/2000 RULE —	CLASS 709	GROUP ART UNIT 2755	ATTORNEY DOCKET NO. 9683/65
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## **APPLICANTS**

MASAAKI YAMAMOTO, KANAGAWA, JAPAN;  
KATSUMI SEKIGUCHI, KANAGAWA, JAPAN;  
MASAHARU NAKATSUCHI, KANAGAWA, JAPAN;  
NORIHITO SEKIZAKI, KANAGAWA, JAPAN;

**\*\* CONTINUING DATA \*\*\*\*\***

THIS APPLICATION IS A 371 OF PCT/JP99/04636 08/27/1999

**\*\* FOREIGN APPLICATIONS \*\***

JAPAN HEI 10-242318 08/27/1998

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 06/06/2000

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY JAPAN	SHEETS DRAWING 9	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 6
Verified and Acknowledged	Examiner's Signature  Initials				

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TITLE

## PUSH INFORMATION DELIVERY METHOD AND ITS REPEATER

<b>FILING FEE RECEIVED</b> 1880	<p>FEES: Authority has been given in Paper          No. _____ to charge/credit DEPOSIT ACCOUNT          No. _____ for following:</p>	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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CONFIRMATION NO. 9755

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Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	JAPAN	9	17	6
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

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PUSH-TYPE INFORMATION TRANSMISSION METHOD AND TRANSFER DEVICE THEREOF

FILING FEE RECEIVED 1880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees ( Filing )
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		<input type="checkbox"/> Other _____
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